

MDC Enhancements Year 2: 2016-2017

Provider Reports: Stage 2

- Individual cases can be assigned to up to two provider roles (e.g., Labor Care Management and Final Stage Provider)
- Metrics shown by both roles within both individual provider and practice group screens
- Provider Attribution Review enables attribution reflecting two provider fields

Delivering Provider
 not seeing the provider here?

Labor Care Provider

Display Metrics by either Provider Role

Provider	Total Deliveries	Cesarean Birth	
		Overall	Primary
		Rate	Rate
2014 Statewide		32.5% (157724/484906)	20.1% (80071/398083)
Demo Hospital	2037	37.1% (756/2037)	25.5% (429/1684)
Kerner, John	20 (1.0%)	40.0% (8/20)	29.4% (5/17)
Lipson, Morris	47 (2.3%)	27.7% (13/47)	19.0% (8/42)
Marasse, Henry	72 (3.5%)	33.3% (24/72)	18.6% (11/59)

Custom Benchmarking for Hospitals or Systems

Enable hospitals or systems to set their own custom benchmarks

“Augmentation” Files

Currently, when hospitals submit core data files, if cases are later found to be missing, they cannot upload solely those missing cases; they must delete out the original file and re-submit the revised complete file. CMQCC will revise its infrastructure to allow submission of “augmentation files” moving forward.

Push Data

Build infrastructure that enables automated transmission (via e-mail) of defined data fields to hospitals/systems that want to auto-populate internal dashboards. Hospitals/Systems would be able to customize the data fields they wish to have transmitted.

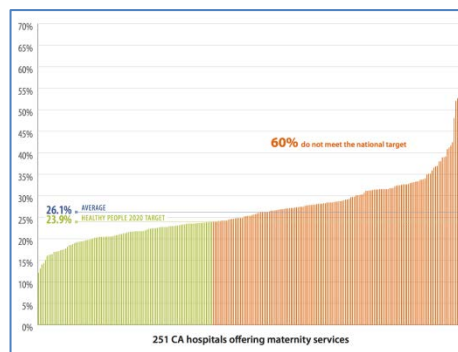
System Dashboard

Build infrastructure that allows systems to create a custom dashboard within the MDC for all their hospitals participating in the MDC.

Comparative Delivery Volumes

Two features:

- Add new “caterpillar” style graph to reporting page, showing the rates for other hospitals and highlighting hospital’s own; ability to toggle comparisons (all MDC, your system). Something like the below, different color and no major color (possibly a line indicating the target)
- Would be available for all measures
- Would show hospital’s percentile (both volume-weighted and raw) measure
- Add new “Annual Delivery Volume”



current state, your NICU level, but with the current hospital a differences based on target

volume-weighted and raw) measure

Sub-Categories for Unexpected Newborn Complications (UNC) Measure

Calculate UNC Rates among Primary TSV Population; 6 different permutations:

- Overall UNC among vaginally-delivered TSV cases
- Overall UNC among CS-delivered TSV cases

- Severe UNC among vaginally-delivered TSV cases
- Severe UNC among CS-delivered TSV cases
- Moderate UNC among vaginally-delivered TSV cases
- Moderate UNC among CS delivered-TSV cases

New Ad Hoc Tool Reporting Feature

Add new analytic feature to Ad Hoc Reporting tool.

- Ability to define new “populations” based on *select* measure numerators/denominators (e.g. UNC and Primary TSV cases)
- Example: Base reporting population on:
 - a) linking two populations (e.g. Primary TSV CS (IQI-33) denominator and UNC denominator)
 - b) All numerator cases of a measure (e.g. those that had Primary TSV Cesarean)
 - c) All denominator cases of a measure not in numerator (e.g. those that had Primary TSV vaginal delivery)

SMM Measures: Part B

- For the “SMM Overall” measure: Within the patient-level drill down screens, add a column for which category bucket(s) the complication fall into, per the categories in the definition (e.g. Acute MI, Renal Failure, Eclampsia, Transfusion, etc.). Should also be included in the CSV download. Display counts for the number of cases that fall into each SMM sub-category

SMFM Primary CS Rate

Addition of new Primary C-section measure from Society for Maternal Fetal. Two subgroups would also be provided for this measure via a Measure Analysis tool: Nullips (parity=0) and Multips (parity >=1)

Metrics by Race-Ethnicity

Add new tab within measure screens that shows metric by race-ethnicity (just like MDC already does by “Payer Category” in sample below)



VBAC Sub-Measures

Currently MDC has two VBAC measures, per AHRQ specifications: VBAC-All (VBACS among all deliveries with prior CS) and VBAC-Uncomplicated (VBACs among deliveries with prior CS exclusive of breech, multiple, preterm).

New VBAC sub-measures to include:

- VBAC Measure to assess successful VBACs among those that underwent trial of labor. Possible definition: “# VBACS/#VBAC plus # with ICD code for Failed Trial of Labor (among those with prior CS.)”
- Data quality metric comparing BC field for Trial of Labor vs. ICD code for Failed Trial of Labor
- VBAC drill-down by Spontaneous and Induced Labor

Highlight ICD Codes Resulting in Fallout

For the UNC and SMM Measures: On the patient-drill down screen, highlight the codes that lead to the case being designated a fallout.

Submeasures for Unexpected Newborn Complications Measure

Push Moderate UNC and Severe UNC to the Clinical Quality section (promote from only being accessible within the measure analysis page)